

CLAIMS ONLY						Application Number <i>09750858</i>	Filing Date
						Applicant(s)	
						* May be used for additional claims or amendments	
CLAIMS	AS FILED <i>10/20/05</i>		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
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50							
Total Indep	15		15				
Total Depend	16	16					
Total Claims	31	31					